



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

RECEIVED

DHSS Breath Alcohol Program

By Carol Day at 6:28 am, Sep 15, 2009

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN 20154	DATE OF INSPECTION 09-10-2009
LOCATION OF INSTRUMENT (STREET AND CITY) 12 Weir Street Leadington, MO 63601	TIME OF INSPECTION 15:00

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C)	34c
<input checked="" type="checkbox"/> CALIBRATION CHECK - Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP) <input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE <input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)	

TEST 1 <input checked="" type="checkbox"/> .097	TEST 2 <input checked="" type="checkbox"/> .098	TEST 3 <input checked="" type="checkbox"/> .096
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<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED)											
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)											
REFUSALS	2	(0-.04)	0	(.05-.09)	2	(.10-.14)	0	(.15-.19)	0	(Over .19)	0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Solution used: 0.10% Guth Laboratories Lot-09120 Bottle -1122 Expires- 04/08/2010

Instrument is within Department of Health specifications

INSPECTING OFFICER	
SIGNATURE 	PRINT NAME CM Wakefield
TYPE II PERMIT NUMBER/EXPIRATION DATE 820201 06-18-2010	TELEPHONE NUMBER 573-431-5637



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 09120 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain 0.1198 percent (w/vol) ethyl alcohol. The expiration date for this lot number is April 8, 2010 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.10 percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
LEADINGTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201234
09/10/09
15:05

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS:	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEF
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmnop
qrstuvwxyz{|}~"

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
LEADINGTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201254
09/10/09

ARREST TIME: 15:00

SUBJECT NAME:

SIMULATOR:

DOB: 09/09/60

SEX: M

STATE/D.L.: MO/9999

ARRESTING OFFICER:

WAKEFIELD/CM

OFFICER I.D.: 501

TESTING OFFICER:

WAKEFIELD/CM

OFFICER I.D.: 501

PERMIT NUMBER: 920201

EXPIRATION DATE: 06/18/10

MISCELLANEOUS DATA:

MONTHLY MAINT

--- BREATH ANALYSTS ---

BLANK TEST

1.000

15:19

INTERNAL STANDARD

VERIFIED

15:19

RADIO INTERFERENCE

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
LEADINGTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201254
09/10/09

TESTING OFFICER:

WAKEFIELD/CM

OFFICER I.D.: 501

PERMIT NUMBER: 920201

EXPIRATION DATE: 06/18/10

MISCELLANEOUS DATA:

MONTHLY MAINT

--- SUPERVISOR MODE ---

BLANK TEST	1.000	15:09
INTERNAL STANDARD	VERIFIED	15:09
EXTERNAL STANDARD	1.097	15:10
BLANK TEST	1.000	15:10
EXTERNAL STANDARD	1.098	15:11
BLANK TEST	1.000	15:11
EXTERNAL STANDARD	1.096	15:11
BLANK TEST	1.000	15:11

N = 3

SIM. = .1

AVG. = 1.097

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



CLEDITH WAKEFIELD

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 06/18/08

Number 820201

Expires 06/18/2010

MO 580-0771 (7-88)

Eric C. O'Leary

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)